

line of argument. If one reads the editorial note in *American Medicine* (on the title page we read that it is "Founded, Owned and Controlled by the Medical Profession of America"), and then takes the trouble to look carefully through its advertising pages, one cannot help but blush for the "Medical Profession of America," and believe that *American Medicine* is one of the journals published for "private profit," and not for the "profession." Amongst other highly edifying and improving things, one finds that "The family laxative, California Fig Syrup," is presented to "the medical profession of America"; sal-codeia (one of the numerous acetanilid mixtures); ergoapiol; bovine; Hayden's Viburnum compound; antiphlogistine; tongaline; labordine; eusoma; anasarine (stated to be a "cure for dropsy"—recommended by "the medical profession of America" to thinking medical men as "a cure for dropsy"!); Peacock's bromides; seng; chionia, etc., *ad nauseam*, are also promoted by *American Medicine*. One is almost speechless at the contemplation of such hypocrisy, and, if he thinks at all, must ask himself whether this is not one huge confidence game! To make such a high-minded statement editorially—and to hand to its readers such detestable advertising pages, seems almost incredible. We humbly suggest to *American Medicine* that it change the line under its title to read: "Founded by the Medical Profession; Owned and Controlled by the Nostrum Manufacturers of America."

Doubtless because of the fact that, in forceful but rather inelegant language, "there is a sucker born every minute," there seems to

BEWARE OF FAKES. be born almost as frequently some fake scheme for separating the "sucker" from his coin. One of the

very rawest of the new ones comes to the JOURNAL office in the guise of what looks like a circular periodical on "iridium (medicinal); for the first time in the medical history of the world * * * discovered, introduced and clinically perfected from the laboratory of this company"—the "Platinum Co., of America." The pamphlet is an astonishing collection of statements, which it seems almost unbelievable that a thinking man, and especially a physician, could accept as anything more than a huge joke. But we are advised that some men have been so thoughtless as to contribute to the exchequer of this "Company," and hence this word of warning. Amongst other highly entertaining things, the pamphlet says, under the caption of "Proven Facts": "Medicinal iridium is death to uric acid, all forms of syphilitic disease, rheumatism, Bright's disease, diabetes, all forms of stomach troubles, cancer, epilepsy, etc." Needless to say, the "Company" does business only on a cash-in-advance basis, and does not send out samples or accept personal checks. It is good enough to offer to send 60 grains of this marvelous material to anyone who will send \$5.00 cash with the order. These fakes must pay or they

would not exist; only one deduction is possible—some medical men must be just about the easiest of all "easy things."

"Changes in the Pharmacopeia of the United States" is the title of a work just issued in pamphlet form by the P. H. and M. H. Service, and it is a monograph which should be in the hands of every practitioner of

medicine. The introduction states that "the medical profession as a whole can scarcely be said to give the publication the support that it deserves; physicians often prescribe proprietary drugs or articles under commercial names when a greater familiarity with the Pharmacopeia would show that there are official preparations of similar character but of more uniform composition." Let us consider one example, at the present time. There are upon the market a number of preparations, each with its own fanciful name, which are generally supposed to be about a 50% solution of cresol in linseed oil soft soap. Of these we may note *lysol*, *creolin*, *disinfectol*, *entero-cresol*, *germol*, *cresolin*, *lysitol*, etc. The Pharmacopeia gives us *Liquor Cresolis Compositus*, and defines its standard of purity and strength. Now just stop for a moment and think about this. In the first place, if you prescribe any one of these commercial preparations—as for instance *lysol*—you have no assurance whatsoever of what you will be forcing your patient to use. It may contain some cresol to-day and none to-morrow, for there is nothing to compel the manufacturer to put any special thing into the preparation he calls *lysol*. He may bottle up coal oil and label it "*lysol*," if he so chooses. If the price of cresol goes up, he may reduce the amount which he puts into his preparation. In other words, you are ordering a name and nothing else; a name with nothing to assure you of the nature or composition or permanence of composition, of the thing so designated. Now consider another point: Suppose a community having seven physicians, each one of whom has been approached by a representative of one of the houses manufacturing the preparations named, and has been convinced that one only of the preparations is the real "Simon-pure-best" and that the others are—to put it mildly—not so good. (This is nearly always the case; *each* brand is emphatically "the best ever.") As a result, each one of these seven men is ordering a different brand of what is practically the same thing, and the pharmacist is forced to keep seven brands, and to spend seven times the necessary amount of money—why? Simply because of the inexcusable ignorance of these seven physicians! The Pharmacopeia gives one single standard preparation; it defines the strength and the mode of manufacture; it makes the pharmacist responsible for this standard; it guarantees that the patient will always receive the same thing; it insures that the physician shall know exactly what he is prescribing and what the patient is using; it relieves

the pharmacist of the unreasonable and unjust burden which has been placed upon him through the ignorance of the physician, and it places upon him the responsibility which is rightly his. Just stop in your busy life, for a moment, and think of this. It is not a fanciful sketch, but an actual occurrence, and only one of hundreds which might be cited. Will you order some preparation of this sort under a trade name that gives you no assurance of what the patient will receive, or will you hark back to the Pharmacopeia of the United States and order *Liquor Cresolis Compositus*, knowing exactly what you are doing, and what your patient will receive—or where to place the blame if he does not receive exactly what you have ordered?

Sad as are the immediate consequences, the present epidemic of yellow fever in New Orleans will be of inestimable benefit to the world. Many physicians and sanitarians throughout the South have refused to accept the theory, apparently well demonstrated, that the *Stegomyia* is the intermediate host and the only means of conveyance of the disease. It is true that the actual cause of the disease has not been demonstrated under the microscope, but certainly no chain of circumstantial evidence and corroborative testimony was ever stronger. In New Orleans, due to carelessness, ignorance or lack of common intelligence, several foci had been established before the presence of yellow fever was generally known and any efforts had been made to grapple with the epidemic. As a result, something like a thousand cases have occurred, and some two hundred deaths have resulted. Ludicrously rigid quarantine has been established by neighboring states, and the panic at one time threatened to become serious. The reports that reach us indicate a commendable promptness on the part of the Marine Hospital Service in taking hold of the situation, and an equally satisfactory yielding of the local health authorities to the command of the service. It is high time that all epidemics of infectious diseases should be promptly turned over to the Public Health and Marine Hospital Service, and full control of all local affairs placed in the hands of that excellent department of the federal government. An epidemic of yellow fever is not a local concern; it is a matter of national import, and as such should properly be under the full control of the national government. The truth or falsity of the mosquito theory of the dissemination of yellow fever will be made manifest, in all probability, to the most dense, by the time that the present epidemic in New Orleans is stamped out. In Cuba, Wood and the yellow fever commission showed what could be done against the disease when the sanitary efforts of the health officers were based upon the mosquito theory, and we may confidently expect to see very much the same general result in New Orleans, now that the Marine Hospital Service is in full charge.

The question of a new City and County Hospital for San Francisco is in an exceedingly unfortunate condition, and should receive the attention of all physicians in that community, and also of all the various organizations of business men and labor unions. It will be recalled that a resolution of the Board of Supervisors authorized a general vote on the issuance of bonds to cover the cost of a new hospital. The election was held and the bond issue authorized. The unfortunate part of the transaction is that, through some inadvertence, the original resolution of the Supervisors contained a statement that the new hospital should be erected on the Almshouse tract. This suggested location is an exceedingly bad one, for it is remote, rather inaccessible, and very cold and windy. The unfortunates who must be placed in the city's hospital are generally in bad condition, and to require that they be transported a considerable and an unnecessary distance is certainly ill advised, to say the least. It would also be very detrimental to convalescing patients to expose them to the almost continuous winds and heavy fogs to which the Almshouse tract is almost constantly exposed. This is a question that appeals not at all to the rich, but only to the proletariat, and hence should appeal to the great majority of voters. The physicians, not alone of San Francisco, but of the whole state, should be interested in seeing that the questions at issue be properly understood, and that so serious an error be avoided, even if it shall require that the bond issue be once more referred to the voters of the community.

On the first day of this month of September, the Eighth Decennial Revision of the United States Pharmacopeia becomes the official standard of the United States and of something like one-half of the states in the Union. The Revision Committee, consisting of some of the ablest physicians, pharmacists and chemists in this country, has spent five years working upon the present volume, and the result of their efforts is in the highest degree commendable. It is well within moderation to say that every conscientious physician should have a copy of this book upon his desk; it should be to him the Bible and the prayer book of his professional life; if, in prescribing for the sick he restricts himself to those articles which are contained in the Pharmacopeia, he will protect himself, his patient and his pharmacist, and it is safe to say that no patient of his will have suffered for lack of the proper remedy. With the exception of a very few articles—mostly chemicals so recently patented that they could not, under the rules of the Convention of 1900, be included in the present work—the conscientious physician will not have to go outside of the Pharmacopeia to find all the remedies which he may need. The standards of purity, quality and strength of pharmacopeial preparations are fixed

UNFORTUNATE COMPLICATION.

YELLOW FEVER.

DO NOT FORGET.